MULTIPLE DEPENDENT CLAIM 04 MAY 2006 SERIAL NO. FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875) APPLICANT(S) **CLAIMS** AFTER AS FILED (703) 305-8421 AFTER I AMENDMENT 1 MAMENDMENT AFTER AS FILED IND. DEP. IND. AFTER DEP. ("AMENDMENT IND. DEP. 2 MAMENDMENT IND. DEP. IND. DEP. IND. DEP. <u>59</u> <u> 29</u> <del>78</del> <del>79</del> TOTAL IND T. TOTAL IXD TOTAL DEP TOTAL TOTAL DEP CLAIMS TOTAL CLADIS PTO LISO CREV LIMO U.S. DEPARTMENT of COMMERCE